Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF MARYLAND		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exar licer Bring iden	e the name that is on government-issued ure identification (for mple, your driver's use or passport). g your picture tification to your ting with the trustee.	Tamara First name R Middle name Owens Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	use Inclu	other names you have d in the last 8 years ade your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security aber or federal vidual Taxpayer atification number	xxx-xx-1043	

Debtor 1 Tamara R Owens

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live		If Debtor 2 lives at a different address:
		7134 Britens Way Brandywine, MD 20613 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Prince Georges County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Deb	otor 1 Tamara R Owens			Case number (if known)	
Par	Tell the Court About	our Bankruptcy Case			
7.	The chapter of the Bankruptcy Code you are		description of each, see <i>Notice Rec</i> to the top of page 1 and check the a	quired by 11 U.S.C. § 342(b) for Individuals	Filing for Bankruptcy
	choosing to file under	☐ Chapter 7			
		☐ Chapter 11			
		☐ Chapter 12			
		Chapter 13			
8.	How you will pay the fee	about how you m	nay pay. Typically, if you are paying orney is submitting your payment on	ease check with the clerk's office in your loothe fee yourself, you may pay with cash, control your behalf, your attorney may pay with a	ashier's check, or money
				this option, sign and attach the Application	n for Individuals to Pay
		☐ I request that me but is not require	d to, waive your fee, and may do so	this option only if you are filing for Chapter only if your income is less than 150% of the	ne official poverty line that
				the fee in installments). If you choose this ived (Official Form 103B) and file it with yo	
9.	Have you filed for	■ No.			
	bankruptcy within the last 8 years?	☐ Yes.			
		District	When	Case number	
		District	When	Case number	
		District	When	Case number	
10.	Are any bankruptcy cases pending or being	■ No			
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.			
		Debtor		Relationship to you	
		District	When	Case number, if kno	own
		Debtor		Relationship to you	
		District	When	Case number, if kno	own
11.	Do you rent your residence?	■ No. Go to line	12.		
		☐ Yes. Has your I	andlord obtained an eviction judgme	ent against you?	
		□ No	. Go to line 12.		
			s. Fill out <i>Initial Statement About an</i> s bankruptcy petition.	Eviction Judgment Against You (Form 10	(A) and file it as part of

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Deb	otor 1 Tamara R Owens				Case number (if known)
Par	Report About Any Bu	usinesses	You Own	as a Sole Proprie	tor
12.	Are you a sole proprietor of any full- or part-time	■ No.	Go to	Part 4.	
	business?	-	Nama	and location of hus	inaca
	A cala manufatanahin ia a	☐ Yes.	IName	and location of bus	illess
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Stat	e & ZIP Code
	it to this petition.		Check	k the appropriate bo	x to describe your business:
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))
				None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	s. If you in ns, cash-fl S.C. 1116(ndicate that you are a ow statement, and find (1)(B).	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	No.	I am r	not filing under Chap	oter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code.		11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	· Have Any	/ Hazardo	ous Property or An	y Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?			liate attention is why is it needed?	
	For example, do you own		,	,	
	perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	
	, , ,				Number, Street, City, State & Zip Code

Debtor 1 Tamara R Owens

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

Incapa	

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Tamara R Owens				Case number	(if known)
Part	6: Answer These Quest	ions for Re	porting Purposes			
16.	What kind of debts do you have?	16a.	Are your debts primarily coindividual primarily for a pers			ed in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.			
			Yes. Go to line 17.			
		16b.	Are your debts primarily but money for a business or inve			
			☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you o	we that are not consun	ner debts or business	debts
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter	7. Go to line 18.		
	Do you estimate that after any exempt property is excluded and	☐ Yes.	I am filing under Chapter 7. E are paid that funds will be av			rty is excluded and administrative expenses
	administrative expenses		□No			
	are paid that funds will be available for		□Yes			
	distribution to unsecured creditors?					
18.	•	1 -49		1 ,000-5,000		☐ 25,001-50,000
	you estimate that you owe?	☐ 50-99		5001-10,000)	□ 50,001-100,000
		☐ 100-19 ☐ 200-99		10,001-25,00	00	☐ More than100,000
19.	How much do you	□ \$0 - \$5	50,000	□ \$1,000,001 -	- \$10 million	□ \$500,000,001 - \$1 billion
	estimate your assets to be worth?		1 - \$100,000	□ \$10,000,001	- \$50 million	☐ \$1,000,000,001 - \$10 billion
			001 - \$500,000	□ \$50,000,001 □ \$100,000,00		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
		□ \$500,0	001 - \$1 million	— \$100,000,00	71 - \$500 million	Li More triari \$50 billiori
20.	How much do you	□ \$0 - \$5	50,000	□ \$1,000,001 -	- \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your liabilities to be?		01 - \$100,000	\$10,000,001		□ \$1,000,000,001 - \$10 billion
			001 - \$500,000 001 - \$1 million	□ \$50,000,001 □ \$100,000,00		☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion
		— \$500,0	101 - \$1 million	_ \$100,000,00	, , , , , , , , , , , , , , , , , , ,	
Part	7: Sign Below					
For	you	I have exa	amined this petition, and I dec	clare under penalty of p	perjury that the informa	ation provided is true and correct.
						under Chapter 7, 11,12, or 13 of title 11, ose to proceed under Chapter 7.
			ney represents me and I did r s, I have obtained and read the			an attorney to help me fill out this
		I request	relief in accordance with the c	chapter of title 11, Unite	ed States Code, speci	fied in this petition.
		bankrupto and 3571	y case can result in fines up t			property by fraud in connection with a ars, or both. 18 U.S.C. §§ 152, 1341, 1519,
		Tamara	R Owens		Signature of Debtor	2
		Signature	of Debtor 1			
		Executed	_ · · · · · · · · · · · · · · · · · · ·		Executed on	
			MM / DD / YYYY		MM /	DD / YYYY

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Debtor 1 Tamara R Owens Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Rowena N. Nelson, Esq. Signature of Attorney for Debtor	Date	February 11, 2020 MM / DD / YYYY
Rowena N. Nelson, Esq. 28212 Printed name		
Law Office of Rowena N. Nelson, LLC		
1801 McCormick Drive Suite 150		
Upper Marlboro, MD 20774		
Number, Street, City, State & ZIP Code		
Contact phone 301.358.3271	Email address	information@rnnlawmd.com
28212 MD		
Bar number & State		

Certificate Number: 12459-MD-CC-034055105



CERTIFICATE OF COUNSELING

I CERTIFY that on <u>February 6, 2020</u>, at <u>7:50</u> o'clock <u>AM PST</u>, <u>Tamara Owens</u> received from <u>Abacus Credit Counseling</u>, an agency approved pursuant to 11 U.S.C. 111 to provide credit counseling in the <u>District of Maryland</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: February 6, 2020 By: /s/Dacie Chewitt

Name: Dacie Chewitt

Title: Credit Counselor

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. 109(h) and 521(b).

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Fill	in this inform	ation to identify your	case:				
	otor 1						
Der	NOI I	Tamara R Owens First Name	Middle Name	Last Name			
1 -	otor 2 use if, filing)	First Name	Middle Name	Last Name			
` '		kruptcy Court for the:	DISTRICT OF MARYLA				
(if kn							t if this is an ded filing
-							ŭ
Of	ficial For	m 106Sum					
			and Liabilities a	nd Certain Statistica	Il Information		12/15
info	rmation. Fill o	ut all of your schedul	es first; then complete t	e are filing together, both are on this form. If the box at the top of this pa	you are filing amend		
ı aı	Julilla	TIZE TOUI ASSELS					
						Your a	ssets of what you own
1.		B: Property (Official F 55, Total real estate, f				\$	384,819.00
	1b. Copy line	62, Total personal pro	perty, from Schedule A/B.			\$	14,544.00
	1c. Copy line	63, Total of all propert	y on Schedule A/B			\$	399,363.00
Par	t 2: Summa	rize Your Liabilities					· · · · · · · · · · · · · · · · · · ·
							abilities t you owe
2.			laims Secured by Propert mn A, Amount of claim, at	y (Official Form 106D) the bottom of the last page of F	Part 1 of Schedule D	\$	372,194.00
3.			Unsecured Claims (Official 1 (priority unsecured claim	al Form 106E/F) ns) from line 6e of <i>Schedule E/F</i>	=	\$	0.00
	3b. Copy the	total claims from Part	2 (nonpriority unsecured of	claims) from line 6j of Schedule	E/F	\$	99,960.00
					Your total liabilities	\$	472,154.00
Par	t 3: Summa	rize Your Income and	I Expenses			•	
4.		our Income (Official Formbined monthly incom		e /		\$	7,572.78
5.		Your Expenses (Officia onthly expenses from I				\$	6,980.00
Par	t 4: Answer	These Questions for	Administrative and Stat	tistical Records			
6.	•		er Chapters 7, 11, or 13? ton this part of the form. C	heck this box and submit this fo	orm to the court with yo	ur other sch	nedules.
7.	YesWhat kind of	f debt do you have?					
				debts are those "incurred by an 9g for statistical purposes. 28 U		a personal,	family, or
	☐ Your de	ebts are not primarily	consumer debts. You ha	eve nothing to report on this part	· ·	s box and s	ubmit this form to
Otc.	the cour	t with your other sched		iliting and Cartain Statistical L			2000 1 of 2

Summary of Your Assets and Liabilities and Certain Statistical Information Official Form 106Sum

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Debtor 1 Tamara R Owens

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

11,000.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	63,071.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	63,071.00

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				,,,				
Fill	n this information	to identify	your case and th	is filin	g:		ı	
Deb	· ·	mara R O						
Deb	tor 2	t Name	Middle	Name	Last Name			
		t Name	Middle	Name	Last Name			
Jnit	ed States Bankrup	cy Court for	the: DISTRICT	OF MA	RYLAND			
Cas	e number							☐ Check if this is ar amended filing
_	icial Form	_	_					12/15
Part Do		ny legal or eq			I Estate You Own or Have an Interest In dence, building, land, or similar property?			
1.1	7134 Britens W Street address, if availa		scription	Wha	Condominium or cooperative	the amount	of any secure Who Have Clai	aims or exemptions. Put d claims on <i>Schedule D:</i> ms Secured by Property. Current value of the
	City	State	ZIP Code	Who	Investment property Timeshare Other has an interest in the property? Check one	Describe to	34,819.00 he nature of y ee simple, ten e), if known.	portion you own? \$384,819.00 your ownership interest cancy by the entireties, o
	Prince George	5		_	Debtor 1 only Debtor 2 only	1 66 31111	pie	
	County	-		Othe	Debtor 1 and Debtor 2 only	(see ins	structions)	nmunity property
				Prir	mary Residence			
2.	Add the dollar val	ue of the po	ortion vou own fo	r all of	your entries from Part 1, including a	av antriaa far		

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Debtor 1	Tamara R O	wens	Case	number (if known)	
B. Cars, va	ans, trucks, trac	tors, sport utility ve	hicles, motorcycles		
□ No					
■ Yes					
. 55					
3.1 Mak	ke: Audi		Who has an interest in the property? Check one		laims or exemptions. Put
Mod	del: A5		■ Debtor 1 only		ed claims on <i>Schedule D:</i> ims Secured by Property.
Yea	ar: 2015		Debtor 2 only	Current value of the	Current value of the
	proximate mileage:	60000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	er information: cation: 7134 Bı	ritone Way	☐ At least one of the debtors and another		
ı	andywine MD 2	• •	☐ Check if this is community property (see instructions)	\$10,999.00	\$10,999.00
No Yes S Add the pages Part 3: De	e dollar value of you have attach escribe Your Perso	the portion you ow ed for Part 2. Write	tercraft, fishing vessels, snowmobiles, motorcycle accern for all of your entries from Part 2, including any ethat number here	entries for =>	\$10,999.00 Current value of the portion you own?
Examp. □ No	nold goods and f les: Major appliar	furnishings nces, furniture, linens	, china, kitchenware		Do not deduct secured claims or exemptions.
		LIVING ROOM:	2 couches, 2 tables, lamp, small table		\$490.00
		DINING ROOM:	table, 6 chairs		\$350.00
		BEDROOM: 2 b 2 lamps, 2 vanit	eds, 2 dressers, chest of drawers, desk, 2 mir	rors,	\$750.00
			, 4 chairs, microwave, refrigerator, deep freez shing machine, dryer, stove, dishes, cookwar		\$540.00
		OTHER ROOMS	S: vacuum cleaner, iron		\$15.00
□ No	les: Televisions a		eo, stereo, and digital equipment; computers, printers, s nedia players, games	scanners; music collect	ions; electronic devices
		Used television household item	s (3), cellphone, computer, printer, tablet, sma	all	\$750.00

Official Form 106A/B

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Del	otor 1	Tamara R Ow	ens Ca	ase number (if known)	
			gurines; paintings, prints, or other artwork; books, pictures, or other arts, memorabilia, collectibles	t objects; stamp, coin, or	baseball card collections;
		Describe			
		ent for sports and les: Sports, photogr musical instrun	raphic, exercise, and other hobby equipment; bicycles, pool tables, gol	lf clubs, skis; canoes and	l kayaks; carpentry tools;
[☐ Yes.	Describe			
	Firearn Examp ■ No		shotguns, ammunition, and related equipment		
[☐ Yes.	Describe			
[□ No É	oles: Everyday clot	hes, furs, leather coats, designer wear, shoes, accessories		
ı	Yes.	Describe			
			Used women's clothing, shoes, and accessories		\$500.00
[□ No		elry, costume jewelry, engagement rings, wedding rings, heirloom jewe	elry, watches, gems, gold	I, silver
			Used womens accessories		\$150.00
[Examp ■ No □ Yes.	urm animals bles: Dogs, cats, bi Describe	rds, horses household items you did not already list, including any health aic	ds you did not list	
	■ No □ Yes.	Give specific infor	mation		
	Add t	the dollar value of	all of your entries from Part 3, including any entries for pages yo	ou have attached	\$3,545.00
		scribe Your Financi			
Do	you ov	vn or have any leg	gal or equitable interest in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
[□No		ive in your wallet, in your home, in a safe deposit box, and on hand wh	nen you file your petition	
				Cash	\$0.00
17.			rings, or other financial accounts; certificates of deposit; shares in cred you have multiple accounts with the same institution, list each.	dit unions, brokerage hou	ses, and other similar

Official Form 106A/B Schedule A/B: Property

☐ No

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Debtor 1	Tamara R Ow	ens		Case number (if known)	
■ Yes	S			Institution name:	
		17.1.	Checking	Navy federal credit union xxxxxxx5748	\$0.00
		17.2.	Savings	Bank of America xxxxxxxxx1746	\$0.00
	ls, mutual funds, o <i>mples:</i> Bond funds, i		ent accounts with br	prokerage firms, money market accounts	
19. Non-		ck and	Institution or issuer interests in incorp	er name: porated and unincorporated businesses, including an interest in an l	LLC, partnership, and
joint ■ No	venture				
	s. Give specific info		about them me of entity:		
Nege Non-	otiable instruments i	nclude p	oersonal checks, ca	gotiable and non-negotiable instruments ashiers' checks, promissory notes, and money orders. ransfer to someone by signing or delivering them.	
■ No □ Yes	s. Give specific infor		about them uer name:		
	ement or pension a mples: Interests in IF			403(b), thrift savings accounts, or other pension or profit-sharing plans	
	s. List each account		tely. of account:	Institution name:	
Your		deposit	ts you have made s	so that you may continue service or use from a company t, public utilities (electric, gas, water), telecommunications companies, or o	others
■ No □ Yes	S			Institution name or individual:	
23. Ann u	uities (A contract for	a perio	dic payment of mon	ney to you, either for life or for a number of years)	
■ No □ Yes		uer nam	ne and description.		
26 U.S	ests in an education S.C. §§ 530(b)(1), 53			qualified ABLE program, or under a qualified state tuition program.	
■ No □ Yes	sIns	titution r	name and description	on. Separately file the records of any interests.11 U.S.C. § 521(c):	
■ No	•		, ,	(other than anything listed in line 1), and rights or powers exercisabl	e for your benefit
☐ Yes	s. Give specific info	rmation	about them		
				and other intellectual property eds from royalties and licensing agreements	
☐ Yes	s. Give specific info	rmation	about them		
Exar ■ No	,	nits, exc	lusive licenses, coo	oles operative association holdings, liquor licenses, professional licenses	
	s. Give specific info		about them	_	
Money o	or property owed to	you?		Ci	urrent value of the

Money or property owed to you?

Current value of the portion you own?

Debtor 1	Tamara R Owens	Case number (if known)	
			Do not deduct secured claims or exemptions.
28 Taxre	efunds owed to you		
■ No			
☐ Yes	. Give specific information about them, including whether you	already filed the returns and the tax years	
20 F ''			
29. Famii Exan	y support oples: Past due or lump sum alimony, spousal support, child su	upport, maintenance, divorce settlement, property s	settlement
■ No	,	,	
☐ Yes	. Give specific information		
	amounts someone owes you nples: Unpaid wages, disability insurance payments, disability benefits; unpaid loans you made to someone else	benefits, sick pay, vacation pay, workers' compens	sation, Social Security
	. Give specific information		
	. Give epositio illionnationi.		
Exan □ No	sts in insurance policies nples: Health, disability, or life insurance; health savings accou	•	pe e
■ Yes	 Name the insurance company of each policy and list its value Company name: 	e. Beneficiary:	Surrender or refund
	Company name.	beneficiary.	value:
		5	40.00
	Auto insurance policy	Debtor	\$0.00
	Health Insurance policy	Debtor	\$0.00
If you some	nterest in property that is due you from someone who has are the beneficiary of a living trust, expect proceeds from a life one has died. . Give specific information		ve property because
Exan	s against third parties, whether or not you have filed a law apples: Accidents, employment disputes, insurance claims, or rig		
■ No	Describe each alaire		
⊔ Yes	. Describe each claim		
34. Other	contingent and unliquidated claims of every nature, inclu	ding counterclaims of the debtor and rights to	set off claims
■ No			
☐ Yes	. Describe each claim		
35 Anv f	nancial assets you did not already list		
■ No	manolal assets you are not all easy list		
_	. Give specific information		
		_	
	the dollar value of all of your entries from Part 4, including Part 4. Write that number here		\$0.00
Part 5: D	escribe Any Business-Related Property You Own or Have an Intere	est In. List any real estate in Part 1.	
	own or have any legal or equitable interest in any business-relate	d property?	
■ No. G	So to Part 6.		

 \square Yes. Go to line 38.

Official Form 106A/B Schedule A/B: Property page 5

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Debt	tor 1 Tamara R Owens		Case number (if known)	
Part (6: Describe Any Farm- and Commercial Fishing If you own or have an interest in farmland, list it	Related Property You Own or Have an Interes n Part 1.	it In.	
46. D	Do you own or have any legal or equitable i	terest in any farm- or commercial fishin	g-related property?	
ı	No. Go to Part 7.			
ļ	Yes. Go to line 47.			
Part 1	7: Describe All Property You Own or Have	ın Interest in That You Did Not List Above		
	Do you have other property of any kind you Examples: Season tickets, country club memb No Yes. Give specific information			
54.	Add the dollar value of all of your entries f 8: List the Totals of Each Part of this Form	om Part 7. Write that number here		\$0.00
55.	Part 1: Total real estate, line 2			\$384,819.00
	Part 2: Total vehicles, line 5	\$10,999.00	_	***************************************
57.	Part 3: Total personal and household item			
58.	Part 4: Total financial assets, line 36	\$0.00		
59.	Part 5: Total business-related property, lin	\$45 \$0.00		
60.	Part 6: Total farm- and fishing-related prop	erty, line 52 \$0.00		
61.	Part 7: Total other property not listed, line	54 + \$0.00		
62.	Total personal property. Add lines 56 through	h 61 \$14,544.00	Copy personal property total	\$14,544.00
63.	Total of all property on Schedule A/B. Add	ine 55 + line 62		\$399,363.00

Official Form 106A/B Schedule A/B: Property page 6

		Case 20	-11765 DOC 1	FIIE	ed 02/11/20 Page 17 0	1 48
Fil	I in this informati	on to identify your case	e:			
De	_	Tamara R Owens				
De	btor 2	First Name	Middle Name	L	_ast Name	
		First Name	Middle Name	L	_ast Name	
Un	ited States Bankru	iptcy Court for the: DI	STRICT OF MARYLAND			
	ise number					☐ Check if this is an amended filing
Oi	fficial Form	106C				
			erty You Cla	im	as Evemnt	4/19
<u> </u>	chedule	c. The Prop	erty rou cia		i as Exempt	4/19
the nee	property you listed	d on <i>Schedule A/B: Prope</i> tach to this page as man	erty (Official Form 106A/B)	as yo	our source, list the property that you	r supplying correct information. Using claim as exempt. If more space is additional pages, write your name and
spe any fun exe	ecific dollar amou applicable statu ds—may be unlir	nt as exempt. Alternative tory limit. Some exemposited in dollar amount. cular dollar amount and	vely, you may claim the f tions—such as those for However, if you claim an	ull fa heal exen	th aids, rights to receive certain b nption of 100% of fair market valu	ing exempted up to the amount of enefits, and tax-exempt retirement
Pa	rt 1: Identify th	ne Property You Claim a	s Exempt			
1.	Which set of ex	emptions are you claim	ing? Check one only, ever	n if yo	our spouse is filing with you.	
	You are claim	ng state and federal non	bankruptcy exemptions. 1	11 U.S	S.C. § 522(b)(3)	
	☐ You are claim	ng federal exemptions.	11 U.S.C. § 522(b)(2)			
2.	For any property	y you list on Schedule	A/B that you claim as exe	mpt,	fill in the information below.	
		of the property and line on lists this property	Current value of the portion you own Copy the value from		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
			Schedule A/B	One	on only one box for each exemption.	
		Vay Brandywine, MD Georges County	\$384,819.00		\$25,150.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(2)
	Primary Resid	ence			100% of fair market value, up to any applicable statutory limit	3 · · · · · · · · · · · · · · · · · · ·
	LIVING ROOM lamp, small ta	: 2 couches, 2 tables ble	\$490.00		\$490.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)
	Line from Schede	ule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
	DINING ROOM	l: table, 6 chairs ule A/B: 6.2	\$350.00		\$350.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)
					100% of fair market value, up to any applicable statutory limit	- (,,,,,,
	BEDROOM: 2	beds, 2 dressers, ch	est \$750.00		\$750.00	Md. Code Ann., Cts. & Jud.

Official Form 106C

2 vanity

\$540.00

100% of fair market value, up to

100% of fair market value, up to

any applicable statutory limit

\$540.00

any applicable statutory limit

of drawers, desk, 2 mirrors, 2 lamps,

KITCHEN: table, 4 chairs, microwave,

dishwasher, washing machine, dryer,

Line from Schedule A/B: 6.3

refrigerator, deep freezer,

stove, dishes, cookware

Line from Schedule A/B: 6.4

Proc. § 11-504(f)(1)(i)(1)

Md. Code Ann., Cts. & Jud.

Proc. § 11-504(f)(1)(i)(1)

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De	I amara K Owens					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	OTHER ROOMS: vacuum cleaner, iron	\$15.00		\$15.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)	
	Line from Schedule A/B: 6.5			100% of fair market value, up to any applicable statutory limit		
	Used televisions (3), cellphone, computer, printer, tablet, small	\$750.00		\$750.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)	
	household items Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	1100.3 11 304(1)(1)(1)(1)	
	Used women's clothing, shoes, and accessories	\$500.00		\$500.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)	
	Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit		
	Used womens accessories Line from Schedule A/B: 12.1	\$150.00		\$150.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)	
	Line from Generalic PVB. 12.1			100% of fair market value, up to any applicable statutory limit	1100. 3 11 304(1)(1)(1)(1)	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every No Yes. Did you acquire the property covery No	3 years after that for ca	ises fi	,	,	
	☐ Yes					

Case 20-11765 Doc 1 Filed 02/11/20 Page 19 of 48

Debtor 1 Tamar a R Owens First Name							
Debtor 2 (Spouse #, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: DISTRICT OF MARYLAND Case number (Istoown) Check if this is an amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1, Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes, Fill in all of the information below. State List All Secured Claims List content List All Secured Claims L	Fill in this infor	rmation to identify you	ur case:				
Debtor 2 (Spouse it, fingl) First Name Middle Name Lest Name	Debtor 1	Tamara R Owe	าร				
United States Bankruptcy Court for the: DISTRICT OF MARYLAND Case number (if known) Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entires, and attach it to this form. On the top of any additional pages, write your name and case number (if home). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. 1. Do any creditors have and submit this form to the court with your other schedules. You have nothing else to report on this form. 1. Yes, Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured daim, list the creditor separately much as possible, list the claims in alphabetical order according to the creditor's name. 2. List all secured claims in alphabetical order according to the creditor's name. Creditor's River. City, State & 2p Code Who owes the debt? Check one. Real Estate Mortgage 7134 Britens Way As of the date you file, the claim is: Check all that apply. Debtor 1 only				st Name			
United States Bankruptcy Court for the: DISTRICT OF MARYLAND Check if this is an amended filing							
Case number (if known) Check if this is an amended filling Check if this claim is appassible, little in the information below.	(Spouse if, filing)	First Name	Middle Name La	st Name			
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Describe the property that secures the claim: Creditor's Name Attn: Bankruptcy Po Box 3000 Merrifield, VA 22119 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Opened 01/18 Last Active Describe the property that secures the claim: \$358,922.00 \$384,819.00 \$0.00 \$0.0	for each claim. If	more than one creditor has	s a particular claim, list the other creditors in I		Do not deduct the	that supports this	portion
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Po Box 3000 Merrifield, VA 22119 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtors and another At least one of the debtors and another Check if this claim relates to a community debt Opened 01/18 Last Active	A44 . D		7134 Britens Way				
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□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt □ Opened 01/18 Last Active □ Active □ Check if this claim relates to a community debt □ Opened 01/18 Last Active	Who owes the d	lebt? Check one.					
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt □ Opened 01/18 Last Active □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit ■ Other (including a right to offset) ■ Mortgage	■ Debtor 1 only			gage or secu	ured		
□ At least one of the debtors and another □ Check if this claim relates to a community debt Opened 01/18 Last Active	Debtor 2 only		car loan)				
Check if this claim relates to a community debt Opened 01/18 Last Active Other (including a right to offset) Mortgage	Debtor 1 and [Debtor 2 only	☐ Statutory lien (such as tax lien, mechan	ic's lien)			
Opened 01/18 Last Active	☐ At least one of	the debtors and another	☐ Judgment lien from a lawsuit				
01/18 Last Active			Other (including a right to offset)	rtgage			
7000		01/18 Last					
	Date deht was in		Last 4 digits of account number	7886			

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Deb	otor 1 Tamara R	Owens			Case number (if known)		
	First Name	Middle N	ame Last Name	_			
2.2	Navy Federal (Union	Credit	Describe the property that secures t	he claim:	\$13,272.00	\$10,999.00	Unknown
	Creditor's Name		Automobile 2015 Audi A5				
	Attn: Bankrup Po Box 3000 Merrifield, VA		As of the date you file, the claim is: apply. Contingent	Check all that			
	Number, Street, City, S	State & Zip Code	Unliquidated				
Who	o owes the debt? C	heck one.	☐ Disputed Nature of lien. Check all that apply.				
_	Debtor 1 only Debtor 2 only		☐ An agreement you made (such as r car loan)	nortgage or	secured		
_	Debtor 1 and Debtor 2	,	Statutory lien (such as tax lien, med	chanic's lien))		
	At least one of the deb Check if this claim re community debt		☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)	Purchas	e Money Security		
Date	e debt was incurred	Opened 11/15 Last Active 01/20	Last 4 digits of account numl	ber 819	5		
		•	olumn A on this page. Write that num	ber here:	\$372,194.	00	
	this is the last page	•	the dollar value totals from all pages.		\$372,194.	00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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				J			
Fill in this info	rmation to identify your case	:					
Debtor 1	Tamara R Owens						
200.0.	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States B	ankruptcy Court for the: DI	STRICT OF MARYLAND					
Case number							
(if known)						Check	if this is an
						amend	ed filing
Official For	m 106F/F						
	E/F: Creditors Who	Have Uneccured	Claime				12/15
	nd accurate as possible. Use Pa						· <u>-</u> , · •
eft. Attach the Co	litors Who Have Claims Secured ontinuation Page to this page. If y umber (if known).						
Part 1: List	All of Your PRIORITY Unsecu	ured Claims					
1. Do any credi	itors have priority unsecured cla	ims against you?					
☐ No. Go to	Part 2.						
Yes.							
identify what to possible, list to	ur priority unsecured claims. If a type of claim it is. If a claim has bot the claims in alphabetical order acc e than one creditor holds a particul	h priority and nonpriority amount ording to the creditor's name. If	ts, list that claim here a you have more than tw	and show both priority a	and nonprior	ity amount	s. As much as
(For an expla	nation of each type of claim, see th	e instructions for this form in the	instruction booklet.)				
	,		ŕ	Total claim	Priority amount		Nonpriority amount
	troller of Maryland	Last 4 digits of account	nt number	\$0.00		\$0.00	\$0.00
. ,	Creditor's Name ue Administration Division	n When was the debt in	curred?				
	arroll Street	, iii			_		
	oolis, MD 21411						
	Street City State Zip Code	As of the date you file	, the claim is: Check	all that apply			
Who incurr	ed the debt? Check one.	☐ Contingent					
Debtor 1	only	☐ Unliquidated					
Debtor 2	? only	☐ Disputed					
Debtor 1	and Debtor 2 only	Type of PRIORITY uns	secured claim:				
☐ At least of	one of the debtors and another	☐ Domestic support of	oligations				
☐ Check if	f this claim is for a community d	ebt Taxes and certain o	ther debts you owe the	government			
Is the claim	subject to offset?	Claims for death or	personal injury while yo	ou were intoxicated			
■ No		☐ Other. Specify					
☐ Yes			otice				

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Internal Revenue Service Piority Creditor's Name Po Box 21126 Philadelphia, PA 19114-0326 Number Street City State Zp Code Who incurred the debt? Check one.	Debte	or 1 Tamara R Owens		Case number (if known)	
Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Contingent Unliquidated Unliquidated Debtor 1 only Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Domestic support obligations Tope of PRIORITY unsecured claim: subject to offset? Tope of PRIORITY unsecured claim: subject to offset? Total claim is for a community debt Is the claim subject to offset? Total claim subject to offset? Total claim sagainst you? Notice Total claim sagainst you? Notice Total claim sagainst you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. Submit this form to the court with your other schedules. Yes. Submit this form to the count with your other schedules. Yes. Submit this form to the count with your other schedules. Yes. Submit this form to the count with your other schedules. Yes. Yes. Submit this form to the count with your other schedules. Yes. Yes. Submit this form to the count with your other schedules. Yes. Yes. Yes. Submit this form to the count with your other schedules. Yes. Y	2.2	Priority Creditor's Name PO Box 21126	_	\$0.00	\$0.00 \$0.00
Debtor 1 only Unliquidated Disputed Unliquidated Disputed Domestic support obligations Domestic support support obligations Domestic support support obligations Domestic support support obligations Domestic support obligations Domestic support support obligations Domestic support support obligations Domestic support su			As of the date you file, the claim is:	Check all that apply	
Debtor 2 only	,	Who incurred the debt? Check one.	☐ Contingent		
Debtor 1 and Debtor 2 only		■ Debtor 1 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only		Debtor 2 only	Disputed		
Ant least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? Taxes and certain other debts you owe the government Taxes and certain other debts you owe the government Claims to the death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you death on the good of the creditor sealing injury while you were intoxicated Claims for death or personal injury while you death or personal injury while you death or personal injury while you were intoxicated Claims for a count with your order of the creditor sealins in the alphabetical order of the creditor sealins in the alpha		Debtor 1 and Debtor 2 only	•		
Check if this claim is for a community debt Is the claim subject to offset? Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while for death or personal injury while for the ceditor same for the death or personal injury while for the ceditor same fo		_	☐ Domestic support obligations		
No			Taxes and certain other debts you	owe the government	
Part 2: List All of Your NONPRIORITY Unsecured Claims		Is the claim subject to offset?	☐ Claims for death or personal injury	while you were intoxicated	
Notice Notice		■ No	Other. Specify		
3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes.		☐ Yes			
Amex/Bankruptcy Nonpriority Creditor's Name Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another At least one of the debtors and another Is the claim subject to offset? No No Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 and Debtor 3 only Debtor 4 least one of the debtors and another Is the claim subject to offset? Debtor 5 Debtor 4 only Debtor 5 Debtor 6 NoNPRIORITY unsecured claim: Debtor 7 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	4. L i ui th	ist all of your nonpriority unsecured claims in the nsecured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other	laim. For each claim listed, identify what t	ype of claim it is. Do not list claims alread	dy included in Part 1. If more ut the Continuation Page of
Nonpriority Creditor's Name Correspondence/Bankruptcy Po Box 981540 EI Paso, TX 79998 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No Debtor 1 onfset Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Check if this claim is for a community debt Debtor 1 onfset? Debtor 1 only Disputed Type of NONPRIORITY unsecured claim: Check if this claim is for a community debt Debtor 1 only Debtor 1 only Disputed Type of NONPRIORITY unsecured claim: Debtor 1 only Debtor 1 only Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 9 only Debto	44	Amey/Benkumtey	Lock 4 digito of account number	E262	
Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Debts do separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	4.1	Nonpriority Creditor's Name Correspondence/Bankruptcy Po Box 981540		Opened 08/81 Last Active	\$002.00
□ Debtor 1 only □ Contingent □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts			As of the date you file, the claim	s: Check all that apply	
□ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		Who incurred the debt? Check one.			
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts		■ Debtor 1 only	☐ Contingent		
□ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		Debtor 2 only	☐ Unliquidated		
☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts		☐ Debtor 1 and Debtor 2 only	☐ Disputed		
debt		☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Is the claim subject to offset? □ Debts to pension or profit-sharing plans, and other similar debts			Student loans		
■ No □ Debts to pension or profit-sharing plans, and other similar debts				ration agreement or divorce that you did	not
		_		g plans, and other similar debts	
Outor, oponly		□ Yes	■ Other. Specify Credit Card		

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Debtor	1 Tamara R Owens		Case number (if known)			
4.2	Bank of America	Last 4 digits of account number	8677	\$5,195.00		
	Nonpriority Creditor's Name 4909 Savarese Circle FI1-908-01-50 Tampa, FL 33634	When was the debt incurred?	Opened 09/15 Last Active 02/20			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not			
	■ No	report as priority claims Debts to pension or profit-sharin				
	Yes	Other. Specify Credit Card	<u> </u>			
4.3	Capital One/walmart Nonpriority Creditor's Name	Last 4 digits of account number	0880	\$1,770.00		
	Nonpholity Greditor's Name	When was the debt incurred?	Opened 04/17 Last Active 01/20			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not			
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	■ Other. Specify Charge Acc	count			
4.4	Citibank/The Home Depot Nonpriority Creditor's Name	Last 4 digits of account number	0219	\$5,997.00		
	Citicorp Credit Srvs/Centralized Bk dept Po Box 790034	When was the debt incurred?	Opened 11/07 Last Active 2/04/20			
	St Louis, MO 63179 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	\square Check if this claim is for a community debt		ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	■ No	☐ Debts to pension or profit-sharin				
	☐ Yes	■ Other. Specify Charge Acc	count			

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Debtor	1 Tamara R Owens		Case number (if known)	
4.5	Credit Management, LP Nonpriority Creditor's Name	Last 4 digits of account number	1222	\$76.00
	Attn: Bankruptcy Po Box 118288	When was the debt incurred?	Opened 11/19 Last Active 08/19	
	Carrollton, TX 75011 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Collection	Attorney Comcast Cable	
4.6	FedLoan Servicing	Last 4 digits of account number	0002	\$13,956.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 69184	When was the debt incurred?	Opened 08/16 Last Active 12/31/19	
	Harrisburg, PA 17106 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	☐ Other. Specify		
		Educationa	ll .	
4.7	FedLoan Servicing	Last 4 digits of account number	0001	\$8,514.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 69184 Harrisburg, PA 17106	When was the debt incurred?	Opened 08/10 Last Active 12/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	■ Student loans Obligations arising out of a sena	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	ration agreement of divolce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
		Educationa	I	

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Debto	Tamara R Owens		Case number (if known)	
4.8	FedLoan Servicing	Last 4 digits of account number	0005	\$13,643.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 69184 Harrisburg, PA 17106	When was the debt incurred?	Opened 06/19 Last Active 12/31/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other. Specify		
		Educationa	ıl	
4.9	FedLoan Servicing	Last 4 digits of account number	0004	\$13,241.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 69184 Harrisburg, PA 17106	When was the debt incurred?	Opened 05/18 Last Active 12/31/19	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	☐ Other. Specify		
		Educationa	al	
4.1	FedLoan Servicing	Last 4 digits of account number	0003	\$13,717.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 69184	When was the debt incurred?	Opened 08/17 Last Active 12/31/19	
	Harrisburg, PA 17106 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify		
	-	Educationa	 N	

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Debto	or 1 Tamara R Owens		Case number (if known)	
4.1 1	Navy FCU	Last 4 digits of account number	9721	\$11,055.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 3000 Merrifield, VA 22119 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim i	Opened 05/05 Last Active 01/20 s: Check all that apply	
	Who incurred the debt? Check one.	,		
	Debtor 1 only	Contingent		
	☐ Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	I alaim.	
	At least one of the debtors and another	Student loans	i Ciaiii.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify Credit Card		
4.1	Navy Federal Credit Union	Last 4 digits of account number	6605	\$9,560.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 3000 Merrifield, VA 22119	When was the debt incurred?	Opened 12/17 Last Active 1/31/20	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Unsecured		
4.1	Synchrony Bank/Sams Nonpriority Creditor's Name	Last 4 digits of account number	1599	\$2,574.00
	Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 04/16 Last Active 1/16/20	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	 Obligations arising out of a sepa report as priority claims 	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Charge Acc	count	
		· · · · · · · · · · · · · · · · · · ·		

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

Debtor 1	Tamara	R	Owens
----------	--------	---	-------

Case number (if known)

have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 63,071.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 36,889.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 99,960.00

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Fill in this inform	mation to identify your	case:		
Debtor 1	Tamara R Owens			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF MARYLAND		
Case number _				☐ Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have the Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4	,				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5	2,				
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>

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Fill in this	information to identify yo	our case:		
Debtor 1	Tamara R Owe	ens		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filir	ng) First Name	Middle Name	Last Name	
United Sta	ites Bankruptcy Court for the	e: DISTRICT OF MARYLA	.ND	
Case num	ber			☐ Check if this is an amended filing
Officia	l Form 106H			
	lule H: Your Co	odobtors		42/45
Scried	iule II. Toul CC	denioi 5		12/15
•	·	wn). Answer every question		e as a codebtor.
☐ Yes	3			
Arizon No.	a, California, Idaho, Louisia Go to line 3.	you lived in a community pr ana, Nevada, New Mexico, Pu spouse, or legal equivalent live	erto Rico, Texas, Wash	ry? (Community property states and territories include nington, and Wisconsin.)
in line Form out Co	2 again as a codebtor on	ly if that person is a guaran	tor or cosigner. Make	r if your spouse is filing with you. List the person show sure you have listed the creditor on Schedule D (Offici 06G). Use Schedule D, Schedule E/F, or Schedule G to Column 2: The creditor to whom you owe the debt
	Name, Number, Street, City, State an	nd ZIP Code		Check all schedules that apply:
-	Name Number Street City	State	ZIP Code	☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line
3.2	Name			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line
	Number Street City	State	ZIP Code	_

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	in this information btor 1	Tamara R O									
	btor 2 buse, if filing)										
Uni	ited States Bankrup	ptcy Court for the	: DISTRICT OF MARY	_AND							
	se number								ed filing ent showin	g postpetition ollowing date:	
	fficial Form						Ī	/IM / DD/ \	/YYY		
Be a sup spo atta	plying correct info use. If you are se ch a separate she	accurate as possormation. If you parated and you	sible. If two married peo are married and not filir r spouse is not filing wi On the top of any additi	ng jointly, and your ith you, do not inclu	spouse ide infor	is liv mati	ing with on abou	you, incl t your sp	ude infornouse. If mo	nation about ore space is	your needed,
1.	Fill in your emp			Dahtan 4				Dobton) fi	line en en en	
	information. If you have more	than one job		Debtor 1 ■ Employed				□ Empl		ling spouse	
	attach a separate information abou	e page with	Employment status	☐ Not employed					mployed		
	employers.		Occupation	Executive Offic	er						
	Include part-time self-employed wo		Employer's name	Department of	Transpo	orta	ion				
	Occupation may or homemaker, if		Employer's address	1200 New Jerse Washington, Do							
			How long employed t	here? 4 years	5			_			
Pai	rt 2: Give De	etails About Mor	nthly Income								
	imate monthly inc use unless you are		ate you file this form. If	you have nothing to r	eport for	any	line, write	e \$0 in the	space. Inc	clude your noi	n-filing
	ou or your non-filing e space, attach a s		ore than one employer, co	ombine the information	on for all	empl	oyers for	that perso	on on the li	nes below. If y	you need
							For De	btor 1		btor 2 or ng spouse	
2.			ry, and commissions (b calculate what the monthl		2.	\$	11	,418.33	\$	N/A	
3.	Estimate and lis	st monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross	Income. Add lir	ne 2 + line 3.		4.	\$	11,4	18.33	\$	N/A	

Official Form 106l Schedule I: Your Income page 1

Debt	or 1	Tamara R Owens	-	C	ase	number (if known)				
					For	Debtor 1		or Debtor		
	Сор	y line 4 here	4.		\$_	11,418.33	\$		N/A	
5.	l ist	all payroll deductions:								
0.	5a.	Tax, Medicare, and Social Security deductions	5a		\$	2,667.54	\$		N/A	
	5a. 5b.	Mandatory contributions for retirement plans	5b		\$ -	91.35	\$		N/A	
	5c.	Voluntary contributions for retirement plans	5c.		\$ _	0.00	\$		N/A	
	5d.	Required repayments of retirement fund loans	5d		\$ _	0.00	\$		N/A	
	5e.	Insurance	5e		$\dot{\$}^-$	365.78	\$		N/A	
	5f.	Domestic support obligations	5f.		\$ *	0.00	\$		N/A	
	5g.	Union dues	5g		\$_	0.00	\$		N/A	
	5h.	Other deductions. Specify: TSP	5h	.+	\$_	56.10	+ \$		N/A	
		Health Benefits	_		\$_	365.78	\$		N/A	
		TSP Tax Deferred			\$_	216.67	\$		N/A	
		Discretionary Allotment	_		\$_	82.33	\$		N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	;	\$_	3,845.55	\$		N/A	
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	;	\$_	7,572.78	\$		N/A	
8.	8b. 8c.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent	8a 8b		\$_ \$_	0.00	\$		N/A N/A	
		regularly receive Include alimony, spousal support, child support, maintenance, divorce								
		settlement, and property settlement.	8c.		\$_	0.00	\$		N/A	
	8d.	Unemployment compensation	8d		\$_	0.00	\$		N/A	
	8e. 8f.	Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8e 8f.		\$_ \$_	0.00	\$		N/A N/A	
	8g.	Pension or retirement income	8g		\$_	0.00	\$		N/A	
	8h.	Other monthly income. Specify:	_ 8h	.+	\$_	0.00	+ \$		N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		0.00	\$		N/A	<u> </u>
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		7,572.78 + \$		N/A	= \$	7,572.78
11.	Incluothe	e all other regular contributions to the expenses that you list in Schedule ade contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	depe			. •	-			0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies							\$	7,572.78
13.	Do y	you expect an increase or decrease within the year after you file this form	?							/ income
		No.								
		Yes. Explain:							<u></u>	

Official Form 106l Schedule I: Your Income page 2

Fill	in this informa	tion to identify yo	our case:					
	tor 1	Tamara R O				Che	ck if this is:	
		- Tamara Tr					An amended filing	
	otor 2 ouse, if filing)						A supplement show 13 expenses as of	ving postpetition chapter the following date:
Unit	ed States Bankr	ruptcy Court for the	: DISTRI	CT OF MARYLAND			MM / DD / YYYY	
	e number nown)							
Of	fficial Fo	rm 106J						
		J: Your						12/15
info	ormation. If m		eded, atta	. If two married people and the control of the cont				
Par	t 1: Descr Is this a joir	ibe Your House	hold					
1.	No. Go to							
			in a separ	ate household?				
	□N	0						
	ΠY	es. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of Deb	otor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.						☐ Yes ☐ No
								☐ Yes
								□ No
								☐ Yes ☐ No
								☐ Yes
3.		enses include	.	No				
	•	f people other t d your depende		Yes				
Par	t 2: Estim	ate Your Ongoi	na Monthi	v Evnenses				
Est exp	imate your ex	penses as of y	our bankr	uptcy filing date unless y y is filed. If this is a supp				
				government assistance i				
	value of sucl ficial Form 10		d have inc	eluded it on <i>Schedule I:</i> Y	our Income		Your exp	enses
4.		or home owners and any rent for th		ses for your residence. I r lot.	nclude first mortgag	e 4. S	\$	2,652.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. S	\$	0.00
		rty, homeowner's	s, or renter	's insurance		4b. S	·	0.00
				ipkeep expenses		4c. 9	· ————	300.00
5.		owner's associati nortgage paym		dominium dues our residence, such as ho	me equity loans	4d. \$ 5. \$	·	79.00 0.00
٥.		ייין נייאן ייפייינייי			5 5 4 5 10 01 10	J. (•	0.00

Debtor 1	Tamara	R Owens		Case num	ber (if known)	
6. Uti	lities:					
6a.	Electricity	heat, natural gas		6a.	\$	250.00
6b.	Water, se	ver, garbage collection		6b.	\$	100.00
6c.	Telephone	, cell phone, Internet, satellite, and	d cable services	6c.	\$	550.00
6d.	Other. Sp	ecify:		6d.	\$	0.00
. Fo	od and hous	ekeeping supplies		7.	\$	500.00
. Ch	ildcare and o	hildren's education costs		8.	\$	0.00
. Clo	thing, laund	ry, and dry cleaning		9.	\$	200.00
0. Pe i	rsonal care p	roducts and services		10.	\$	200.00
1. Me	dical and de	ntal expenses		11.	\$	200.00
2. Tra	nsportation	Include gas, maintenance, bus or	train fare.			
	not include c			12.	·	500.00
		clubs, recreation, newspapers,	_	13.	\$	150.00
4. Ch	aritable cont	ributions and religious donatior	ns	14.	\$	200.00
	urance.					
		surance deducted from your pay o	or included in lines 4 or 20.	4.5	•	
	a. Life insura			15a.	·	0.00
	o. Health ins			15b.	·	0.00
	c. Vehicle in			15c.		160.00
		rance. Specify: Home warrant		15d.	\$	45.00
		clude taxes deducted from your pa	ay or included in lines 4 or 20.	4.0	•	
	ecify:			16.	\$	0.00
		ease payments:		170	¢	504.00
		ents for Vehicle 1		17a.	·	584.00
		ents for Vehicle 2		17b.	·	0.00
		ecify: Subscriptions		17c.	*	140.00
		Miscellaneous expens		17d.	\$	170.00
8. Yo	ur payments	of alimony, maintenance, and s	upport that you did not report as our Income (Official Form 106I).	18.	\$	0.00
		your pay on line 5, <i>Schedule I, 1</i> 5 you make to support others wi		10.	\$	0.00
	ecify:	you make to support others wi	to do not live with you.	19.	Ψ	0.00
		erty expenses not included in li	nes 4 or 5 of this form or on Sche		our Income	
		on other property		20a.		0.00
	o. Real esta			20b.		0.00
		nomeowner's, or renter's insurance	e	20c.	·	0.00
		ce, repair, and upkeep expenses		20d.	•	0.00
		er's association or condominium d	lues	20e.		0.00
	ner: Specify:			21.	·	0.00
Ou	ici. opecity.				ΙΨ	0.00
22. Ca l	lculate your	monthly expenses				
	a. Add lines 4				\$	6,980.00
22t	o. Copy line 2	2 (monthly expenses for Debtor 2)	, if any, from Official Form 106J-2		\$	
220	c. Add line 22	a and 22b. The result is your mon	thly expenses.		\$	6,980.00
		•				
		nonthly net income.			•	
		12 (your combined monthly incom	•	23a.	·	7,572.78
23b	c. Copy you	monthly expenses from line 22c a	above.	23b.	-\$	6,980.00
00	. 0.11		and the base of			
230		our monthly expenses from your n	nontniy income.	23c.	\$	592.78
	rne result	is your monthly net income.		200.	T	
For mod	example, do yo		expenses within the year after your and within the year or do you expect your			e or decrease because of a
		Explain hara: Dahtar has dans	tal work in process			
	Yes.	Explain here: Debtor has den t	tai work in process.			

Fill in thi	is information to identify your	case:					
Debtor 1	Tamara R Owens						
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, f	iling) First Name	Middle Name	Last Name				
United St	tates Bankruptcy Court for the:	DISTRICT OF MARYLAND					
Case nur	mber						
(if known)					☐ Check if this is an		
					amended filing		
Official	l Form 106Dec						
Decla	aration About a	n Individual D	ebtor's Sch	hedules	12/15		
, car 3, cr	both. 18 U.S.C. §§ 152, 1341, 1	10 10, unu 007 1.					
Did	you pay or agree to pay some	one who is NOT an attorney	to help you fill out ba	ankruptcy forms?			
_	No						
	Yes. Name of person Atta				ach Bankruptcy Petition Preparer's Notice,		
		Declaration, and S	Signature (Official Form 119)				
	er penalty of perjury, I declare they are true and correct.	that I have read the summa	ry and schedules filed	with this declaration and			
Х	/s/ Tamara R Owens		X				
	Tamara R Owens		Signature of D	Debtor 2			
;	Signature of Debtor 1		-				
ı	Date February 11, 2020		Date				

		nation to identify you						
Deb	otor 1	Tamara R Owen	S Middle Name	Last Name				
	otor 2 use if, filing)	First Name	Middle Name	Last Name				
Unit	ed States Ba	nkruptcy Court for the:	DISTRICT OF MARYLAN	D				
Cas (if kno	se number					Check if this is an mended filing		
Sta Be a	s complete a	of Financial		re filing together, both are	equally responsible for sup			
		n). Answer every que		this form. On the top of any	y additional pages, write you	ur name and case		
Pari	•	Details About Your Ma	arital Status and Where You	Lived Before				
	☐ Married ■ Not mai		35:					
2.			lived anywhere other than	where you live now?				
	■ No □ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.							
	Debtor 1 Pr	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there		
					ity property state or territory ico, Texas, Washington and W			
	■ No □ Yes. Ma	ake sure you fill out <i>Scl</i>	hedule H: Your Codebtors (Of	ficial Form 106H).				
Part	Explain	in the Sources of You	r Income					
	Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.							
	□ No ■ Yes. Fil	I in the details.						
			Debtor 1		Debtor 2			
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)		
From January 1 of current year until the date you filed for bankruptcy:			■ Wages, commissions, bonuses, tips	\$9,857.00	☐ Wages, commissions, bonuses, tips			
			☐ Operating a business		☐ Operating a business			

Official Form 107

Debtor 1 Tamara R Owens					Case number (if known)					
				Debtor 1			Debtor 2			
	Sou			Sources of income Check all that apply.		Gross income (before deductions and exclusions)		Sources of income Check all that apply.		Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2019)			■ Wages, co	■ Wages, commissions, bonuses, tips \$70,110.00			☐ Wages, commissions, bonuses, tips			
				☐ Operating	a business			☐ Operating a	business	
		dar year be December		■ Wages, co			\$74,450.00	☐ Wages, con	ımissions,	
				☐ Operating	a business			☐ Operating a	business	
	winnings. List each No	If you are fil	ing a joint cas	se and you have	e income that y	ou receiv	ed together, list it	only once under D	ebtor 1.	nd gambling and lottery
				Debtor 1				Debtor 2		
				Sources of in Describe belo		each s	income from source e deductions and ions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain Pa	yments You	Made Before	You Filed for E	Bankrupt	cy			
6.	Are either Debtor 1's or Debtor 2's debts primarily consumer debts? □ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by a individual primarily for a personal, family, or household purpose." □ During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more? □ No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.									
	■ Yes.	During the	90 days befo	ebtor 2 or both have primarily consumer debts. days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?						
		■ No. □ Yes	include pay	each creditor to	estic support ob			d the total amount port and alimony.		at creditor. Do not include payments to ar
	Creditor	's Name an	d Address	Da	ites of payme	nt	Total amount paid	Amount you still owe	Was this	payment for

Case number (if known)

7.	Within 1 year before you filed for bankruptur Insiders include your relatives; any general particles of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	ortners; relatives of any gen control, or owner of 20% o	eral partners; partners r more of their voting	erships of which yo g securities; and a	ou are a general ny managing ag	partner; corporations ent, including one fo	
	■ No□ Yes. List all payments to an insider.						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the	his payment	
В.	Within 1 year before you filed for bankrupte insider? Include payments on debts guaranteed or cos		ments or transfer a	ny property on a	ccount of a del	bt that benefited an	
	No						
	Yes. List all payments to an insider Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the Include credit		
	Identify Land Astions Department	Famalaa	para	oun owo	morado ordan	or o marrio	
Pai	rt 4: Identify Legal Actions, Repossession	is, and Foreclosures					
9.	Within 1 year before you filed for bankrupte List all such matters, including personal injury modifications, and contract disputes.						
	■ No □ Yes. Fill in the details.						
	Case title Case number	Nature of the case	Court or agency		Status of the	case	
10.	Within 1 year before you filed for bankrupte Check all that apply and fill in the details below		erty repossessed, f	oreclosed, garnis	shed, attached,	seized, or levied?	
	No. Go to line 11.☐ Yes. Fill in the information below.						
	Creditor Name and Address	Describe the Property		Date		Value of the	
		Explain what happened	I			property	
11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?						
	NoYes. Fill in the details.						
	Creditor Name and Address	Describe the action the	creditor took	Date taker	action was	Amount	
12.	Within 1 year before you filed for bankrupte court-appointed receiver, a custodian, or a		erty in the possess	ion of an assigne	e for the benef	it of creditors, a	
	■ No □ Yes						
Pai	rt 5: List Certain Gifts and Contributions						
13.	Within 2 years before you filed for bankrup No	tcy, did you give any gifts	s with a total value	of more than \$60	0 per person?		
	Yes. Fill in the details for each gift.						
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the g	s you gave ifts	Value	
	Person to Whom You Gave the Gift and Address:						

Debtor 1 Tamara R Owens

Case number (if known)

14.	4. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No				
	☐ Yes. Fill in the details for each gift or co Gifts or contributions to charities that t more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	total	on. Describe what you contributed	Dates you contributed	Value
Par	t 6: List Certain Losses				
15.	Within 1 year before you filed for bankru or gambling?	ptcy or	since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster,
	■ No□ Yes. Fill in the details.				
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the loss the amount that insurance has paid. List pending acc claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers	S			
16.	consulted about seeking bankruptcy or	List Certain Payments or Transfers 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone about seeking bankruptcy or preparing a bankruptcy petition? e any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.		rty to anyone you	
	□ No■ Yes. Fill in the details.				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	′ou	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Abacus Credit Counseling P. O. Box 261176 Encino, CA 91426 www.abacuscc.org		Credit counseling	2/6/2020	\$25.00
	Law Office of Rowena N. Nelson, L. 1801 McCormick Drive Suite 150 Upper Marlboro, MD 20774 information@rnnlawmd.com	LC	Attorney Fees	1/3/2020	\$2,000.00
17.	promised to help you deal with your cree	nin 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any promised to help you deal with your creditors or to make payments to your creditors? not include any payment or transfer that you listed on line 16.		or transfer any propei	rty to anyone who
	☐ Yes. Fill in the details.				
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment

Debtor 1 Tamara R Owens

Debtor 1 Tamara R Owens

Case number (if known)

18.	ithin 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property ansferred in the ordinary course of your business or financial affairs? clude both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not clude gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.					
	Person Who Received Transfer Address Person's relationship to you	Description and v		Describe any property or payments received or debts paid in exchange	Date transfer was made	
19.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-prot ■ No ■ Yes. Fill in the details.		y property to a so	elf-settled trust or similar device	e of which you are a	
	Name of trust	Description and v	alue of the prope	erty transferred	Date Transfer was made	
Par	t 8: List of Certain Financial Accounts, Inst	truments, Safe Deposit	t Boxes, and Stor	rage Units		
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, association of the solution of the	other financial accou	nts; certificates o	of deposit; shares in banks, cred	•	
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accoun instrument	nt or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 yo cash, or other valuables? No Yes. Fill in the details.	ear before you filed for	bankruptcy, any	safe deposit box or other depo	sitory for securities,	
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the contents	Do you still have it?	
22.	Have you stored property in a storage unit or	place other than your	home within 1 ye	ear before you filed for bankrup	tcy?	
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe the contents	Do you still have it?	
Par	t 9: Identify Property You Hold or Control f	or Someone Else				
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No					
	Yes. Fill in the details. Owner's Name	Where is the prop	perty?	Describe the property	Value	
	Address (Number, Street, City, State and ZIP Code)	(Number, Street, City, S Code)		,		
Par	Part 10: Give Details About Environmental Information					
For	the purpose of Part 10, the following definitio	ns apply:				

■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Official Form 107

Debtor 1 Tamara R Owens

Case number (if known)

	toxic substances, wastes, or material into t regulations controlling the cleanup of these	l into the air, land, soil, surface water, groundwater, or other medium, including statutes or f these substances, wastes, or material.					
		ite means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used own, operate, or utilize it, including disposal sites.					
	Hazardous material means anything an env hazardous material, pollutant, contaminant		s waste, hazardous substance, toxic s	substance,			
Rep	port all notices, releases, and proceedings th	at you know about, regardless of wher	n they occurred.				
24.	Has any governmental unit notified you that	t you may be liable or potentially liable	under or in violation of an environme	ental law?			
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of	any release of hazardous material?					
	■ No						
	☐ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
26.	Have you been a party in any judicial or adr	ninistrative proceeding under any envi	ironmental law? Include settlements a	and orders.			
	■ No						
	Yes. Fill in the details.						
	Case Title	Court or agency	Nature of the case	Status of the			
	Case Number	Name Address (Number, Street, City, State and ZIP Code)		case			
Pai	rt 11: Give Details About Your Business or	Connections to Any Business					
27.	Within 4 years before you filed for bankrup	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?					
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time						
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)						
	☐ A partner in a partnership						
	☐ An officer, director, or managing executive of a corporation						
	☐ An owner of at least 5% of the voting or equity securities of a corporation						
	No. None of the above applies. Go to l	Part 12.					
	Yes. Check all that apply above and fill	I in the details below for each business	S.				
	Business Name	Describe the nature of the business	Employer Identification number				
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security	number or ITIN.			
28.	Within 2 years before you filed for bankrup institutions, creditors, or other parties.	tcy, did you give a financial statement	to anyone about your business? Inclu	ıde all financial			
	■ No □ Yes. Fill in the details below.						
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued					
	(

Part 12: Sign Below

I have read the answers on this *Statement* of *Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

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Debtor	1 Tamara R Owens	Case number (if known)
with a l		se statement, concealing property, or obtaining money or property by fraud in connection 50,000, or imprisonment for up to 20 years, or both.
/s/ Ta	mara R Owens	
Tama	ra R Owens	Signature of Debtor 2
Signat	ure of Debtor 1	
Date	February 11, 2020	Date
Did you	ı attach additional pages to Your Statement	of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No		
☐ Yes		
Did you	ı pay or agree to pay someone who is not ar	n attorney to help you fill out bankruptcy forms?
■ No		
☐ Yes.	Name of Person Attach the Bankrupto	y Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court District of Maryland

		= 1501100 01 1/101101		
In re	Tamara R Owens	Debtor(s)	Case No. Chapter	13
		Destor(s)	Chapter	10
	VED	OTELCATION OF ODEDITOD A	/ A TDIX	
	VER	RIFICATION OF CREDITOR M	IAIRIX	
The ab	ove-named Debtor hereby verifies	s that the attached list of creditors is true and con	rrect to the best	of his/her knowledge.
	•			C
Date:	February 11, 2020	/s/ Tamara R Owens		
		Tamara R Owens		<u> </u>

Signature of Debtor

Amex/Bankruptcy Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998

Bank of America 4909 Savarese Circle F11-908-01-50 Tampa, FL 33634

Capital One/walmart

Citibank/The Home Depot Citicorp Credit Srvs/Centralized Bk dept Po Box 790034 St Louis, MO 63179

Comptroller of Maryland Revenue Administration Division 110 Carroll Street Annapolis, MD 21411

Credit Management, LP Attn: Bankruptcy Po Box 118288 Carrollton, TX 75011

FedLoan Servicing Attn: Bankruptcy Po Box 69184 Harrisburg, PA 17106

Internal Revenue Service PO Box 21126 Philadelphia, PA 19114-0326 Navy FCU Attn: Bankruptcy Dept Po Box 3000 Merrifield, VA 22119

Navy Federal Attn: Bankruptcy Po Box 3000 Merrifield, VA 22119

Navy Federal Credit Union Attn: Bankruptcy Po Box 3000 Merrifield, VA 22119

Synchrony Bank/Sams Attn: Bankruptcy Po Box 965060 Orlando, FL 32896